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Ymddiriedolaeth Brifysgol GIG
Gwasanaethau Ambiwylans Cymru
Welsh Ambulance Services
University NHS Trust

FINANCE AND PERFORMANCE COMMITTEE HIGHLIGHT REPORT TO BOARD

This report provides the Board with key escalation and discussion points at the last Committee meeting. A full list of items discussed appears at the end of the report to enable members to raise any questions to the Chair which have not been drawn out in the report.

Trust Board Meeting Date	30 May 2024
Committee Meeting Date	14 May 2024
Chair	Joga Singh

KEY ESCALATION AND DISCUSSION POINTS

ALERT

(Alert the Board to areas of attention)

1. No alerts for the Board from this meeting.

ADVISE

(Detail any areas of on-going monitoring, approvals, or new developments to be communicated)

1. The Committee received the **Digital Plan Refresh 2024-29** and considered options, approving an option which balances addressing essential resource gaps in our day-to-day digital services provision and advancing key digital transformation initiatives that support our IMTP and broader organisational strategy. There was good engagement of committee members ahead of the presentation. Building on the current digital strategy, the Digital Plan prioritises a comprehensive, forward looking approach aligned to the Trust's commitment to serve the people of Wales and is aligned to the Long Term Strategy Delivering Excellence 2030. Members acknowledged the necessary investment in the plan to ensure that digital, cybersecurity, and operational vulnerabilities and inefficiencies are addressed, and that the Trust's digital innovation aligns to our strategic ambitions in the IMTP and long term strategy to meet the advancements in healthcare and the evolving complexities delivery. The funding for this plan is included in the digital revenue allocation of £1.376m and was approved by the Executive Finance Group in the budget setting meeting and included in the financial plan and IMTP for 2024/25. The capital costs of £196k are captured in the capital programme for this financial year.
2. The plan sets out the digital transformation journey to date and how proactive utilisation of digital and technological advancements will enhance our service delivery, provide exceptional patient care, and maximise patient experience. Members discussed key areas including:
 - The rationale for the refresh which centres around three pivotal themes: compliance with regulatory and strategic frameworks, enhancement of patient outcomes, and the optimisation of



resources.

- The key pillars that enable delivery of key work programmes.
 - The five digital tranches approach to track and supporting delivery of objectives and evolution over the next 5-10 years.
 - The Digital Transformation function and Chief Clinical Information Officer (CCIO) role which will be implemented to drive forward innovation and operational efficiency.
 - The four options for balancing operational integrity and digital growth, endorsing option two as the preferred option for the team.
 - The costs attached to approved option are included in the digital financial envelope for 2024/25.
 - The development of new KPIs to track progress, identify areas for improvement and accountability reporting through Board, FPC and internal forums as well as in the wider community.
 - The risks on adequate investment and the maturity and realistic timeliness of implementing the significant work programmes underpinning the plan at a balanced pace was discussed.
3. Members were updated on the Trust's **Information Governance Toolkit** undertaken to test the secure handling of patient data and compliance against legal and regulatory requirements. The preliminary report shows good compliance; however, there are 6 areas that require improvement to meet the minimum standards. An improvement plan is in development and will be reported to Committee in due course.
4. An update on the **Clinical Assessment Software** (CAS) replacement system went live on 30th April 2024 successfully. Call handling time has extended with peak activity on the Bank Holiday meaning some callers had had to wait longer than expected; however, this is returning to normal. Positive initial feedback from Health Boards on referral activity to GP OOH that is a byproduct of new algorithms. Chair expressed thanks and congratulations to the team in meeting the challenging deadlines of this project.
5. Members **Reflections** on the meeting included:
- The Chair thanked Executives and their teams for the effort in preparing well written papers supporting good opportunities for scrutiny, challenge, and support. Members felt it is easy to ask questions given the openness and transparency of the papers and agreed that the time went by quickly despite the lengthy Agenda. The hybrid meeting model will be given consideration after the success of this in other Committees. Thanks was given particularly for the time on the Cyber discussions and to the Chair for steering the meeting.

ASSURE

(Detail here assurance items the Committee receives)

6. The Committee received the **Operations Quarterly update** and noted key areas including:
- The publication of the Manchester Arena Inquiry report in future closed sessions.
 - The AACE centre of excellence demonstrating a return to the required accreditation standards during April.
 - The relief planning pilot is underway on 6 weeks' notice period.
 - Call handling recruitment successful and a formal consultation on career plan is in development in



EMSC.

- Reaping the benefit of overtime controls learning from last year.
 - Month 1 shows a favourable financial position for the directorate.
 - 111 demand is up; however, demand and capacity modelling required to understand required establishment needed.
7. The Committee received assurance on the draft yearend presentation on the **financial position for Month 12 2023/24**. The Board has a detailed paper on the financial position before it for its May meeting. The revenue position reports a small surplus of £85k and the capital expenditure of £22m being fully spent, all subject to audit. Gross savings of £6.546m have been achieved against a target of £6.000m and the Public Sector Payment Policy is on track with performance, against a target of 95%, of 96.4% for the number, and 98.5% of the value of non-NHS invoices paid within 30 days. Audited accounts will be presented to Audit Committee and Trust Board in July 2024 ahead of final submission to Welsh Government.
8. An update was provided on the draft **financial position for Month 1 2024/25** in advance of the submission to Welsh Government with the cumulative year to date (end of April 2024) revenue financial position against budget of a small surplus of £0.019m with capital planned expenditure of £21.672m forecast to be fully spent. This now includes the c£12.828m against the 2024/25 Fleet Business Justification Case, recently confirmed by WG. Savings are reported of £0.663m against the target of £0.569m. Public Sector Payment Policy is on track against the 95% target of 97.3% for non NHS invoices paid in 30 days.
9. An update was provided on the **Financial Sustainability Programme (FSP)** celebrating the overperformance of £546,000 against our planned total for the year. This accomplishment underscores our commitment to Achieving Efficiency and Income Generation, showcasing substantial progress in key schemes. Moreover, our targeted savings opportunities, earmarked at £6.4m, position us strongly for the future and keep this at the forefront of the agenda.
10. The **2023-24 IMTP year-end report** captured a positive summary despite continuing financial challenges in NHS Wales last year. Exceptions reported on the Ambulance Care Programme NET Centre re-roster for operational hours and relief and Consult and Close rates for the Gateway to Care Programme marked in red and the independent prescribing element of the Clinical Transformation Programme which is amber; all of which remain a priority for the 2024/25. The **Forward Assurance Plan for 2024/25** was noted and a key assurance was in relation to apprentices and the diminishing pool of talent, workforce planning and on the redesign of our Clinical Service Model which showcases our opportunities to manage large scale transformation and service wide improvements.
11. **The Digital KPIs** relating to data and analytics, ICT systems, service provision and projects within the IMTP for the period 1 April 2023 to 31 March 2024 were reviewed by exception. The Committee noted:
- The average turnaround for non-trivial data requests spiked at 37 days due to the “operational pause and improve” work to focus on the 111 CAS replacement.
 - A high level of records requests received show an increase of 45% on 2021/23 and 2022/23.
 - Full year system availability metrics will be available for the July meeting.
 - The 111 CAS system replacement went live successfully as planned on 30 April.
 - The Data Linkage project continues to progress focusing on the Out-of-Hospital Cardiac Arrest dataset. A join controller agreement is in development with DHCW and the Trust to meet the



Information Governance requirements.

- The 111 Website project is underway with a strategy report supporting the development of a longer term business case for this service.
 - The QPMF reporting project has increased to a 100% compliance on 75% reported in the last period with version 1 of the MIQPR successfully delivered.
 - The Digital Experience and Digital Champions initiatives have not progressed at pace, yet supporting activities such as automation of processes, engagement with colleagues internally and digital suppliers are underway which will support the delivery of the People & Culture plan in the coming years.
 - The Mobile Data Vehicle Solutions installation project has been concluded and plans are in place for the project wrap up. The NEPTS installs have commenced and on target for June 2024 completion. Operational teams are engaging staff to complete training and the dashboard is on Siren.
12. Members received an update on the work undertaken in relation to **Environment, Decarbonisation and Sustainability** work programmes and noting specifically the continuing progress against that within the Trust's Decarbonisation Action Plan (DAP) in response to the Welsh Government NHS Wales Decarbonisation Strategic Delivery Plan (NHSW- DSDP) which is overseen by the Decarbonisation Programme Board. Members were assured that an escalation plan is in development to ensure the Trust is undertaking all possible actions against identified risks and wider environmental considerations. An application was submitted for an NHS Sustainability Awards early in May and will be shared with Committee as a summary of what has been achieved over the last two years.
13. The **Monthly Integrated Quality and Performance Report (MIQPR) for March and April 2024** was presented. The report is before the Trust Board in May 2024 along with a separate patient harm report. Key highlights included: Red performance at 48% in April acknowledging that red activity continues at rates higher than previous years with the highest red activity week of the year last week which is impacting capacity due to higher attendance rates, Amber one median was one hour and 8 minutes, Abandonment rate for 111 was 5.5%, Sickness rate was 7.67% in March, Abstraction rate was 32.5% in March, and Handover delays were 23,620 hours lost in April.
14. Committee were assured that the **commissioning intention arrangements for EMS and NEPTS** are built into the planning cycles, quarterly assurance cycles and support the work towards our strategic ambitions and transformational plans and monitoring of that will be included in the IMTP delivery reports.
15. A **suite of policies** was presented to Committee and approved. EqIAs had been undertaken for each policy and there were no issues to escalate to Members.
- Purchase Card Policy
 - Waste Management Policy
 - Data Quality Policy
16. The **Audit Tracker** was received, and the Committee noted the update with 60% of FPC related internal audit actions (which were due in quarter) closed in quarter, with 50% of external audit actions due closed this period.



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17. Members received the **Committee Cycle of Business (CoB)** updated following the effectiveness review conducted in Q4 along with the Q1 **Monitoring Report**. The CoB for 2024/25 was approved noting that there are areas that will be dynamically developed throughout the year in relation to Cyber and Commissioning reporting and the Annual Sustainability Report.
18. In **closed session** members received an update on Cyber Reporting and an alert, the initial Capital Programme for 2024/25, the GUH Transfer Service SLA, an updated Business Case for the new Dolgellau Ambulance Station and recommendations relating to the cyber security actions.

RISKS

Risks Discussed: Whilst the report provides that there are no material changes to the eight principal risks within the remit of this Committee as at 7 February 2024, the Committee were assured that there are several changes foreshadowed to these risks in readiness for presentation to Trust Board in May 2024 including:

- a) Two new risks will be included on the Corporate Risk Register – **Risk 623** (Data Protection Legislation) scoring 15 (3x5) and **Risk 542** (Decarbonisation) at a score of 16 (4x4).
- b) **Risk 458** (A confirmed commitment from EASC and/or Welsh Government is required in relation to funding for recurrent costs of commissioning) will be closed from the CRR on the basis that this was specifically in relation to the 100wte and the overlap with **Risks 424** and **139**.
- c) Two risks will be de-escalated from the CRR to the Directorate Risk Registers as the actions have been completed and mitigated to target score. **Risk 283** (Failure to implement the EMS Operational Transformation Programmes) has reached target of 8 (2x4) from 12 (3x4) and **Risk 543** (major disruptive incident resulting in a loss of critical IT systems) has reached target of 10 (2x5) from 15 (3x5).
- d) **Risk 424** (prioritisation or availability of resources to deliver the Trust's IMTP) will reduce in score from 16 (4x4) to 12 (3x4) given the funding allocated within the IMTP financial plan to support key areas of work agreed with Commissioners.

Further, **Risk 594** (the Trust's inability to provide a civil contingency response in the event of a major incident and maintain business continuity causing patient harm and death) remains static at 20 (4x5) reflecting continued challenges across the unscheduled care system.

Risks 260 (a significant and sustained Cyber Attack on WAST, NHS Wales and interdependent networks resulting in denial of service and loss of critical systems) remains at a score of 15 (3x5).

Risks 100 (Failure to persuade EASC/Health Boards about WAST's ambitions and reach agreement on actions to deliver appropriate levels of patient safety and experience) and **Risk 139** (Failure to Deliver our Statutory Financial Duties in accordance with legislation) remain unchanged at this time.



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COMMITTEE AGENDA FOR MEETING		
Operations Quarterly Update	IMTP 2023-24 End of Year Position and Forward Assurance Plan for 2024/25	Digital Reporting
Digital Plan Refresh 2024-2029	Information Governance Toolkit	Commissioning Intentions EMS and NEPTS
Clinical Assessment Software update	Financial Position for Month 12	Financial Position for Month 1 2024/25
Financial Sustainability Programme report	Policies for approval: <ul style="list-style-type: none"> • Purchase Card Policy • Waste Management Policy • Data Quality Policy 	Environment, Decarbonisation and Sustainability Update May 2024
MIQPR and review of metrics	Risk Management and BAF	Audit Tracker
Cycle of Business 2024/25 and Monitoring Report		

COMMITTEE ATTENDANCE						
Name	14 MAY 2024	16 JULY 2024	17 SEPT 2024	19 NOV 2024	16 JAN 2025	18 MAR 2025
Joga Singh						
Kevin Davies						
Bethan Evans						
Peter Curran						
Chris Turley						
Rachel Marsh	Hugh Bennett					
Lee Brooks						
Liam Williams						
Angie Lewis						
Jonny Sammut						
Trish Mills	Julie Boalch					
Hugh Parry						
Damon Turner						

	Attended
	Deputy attended
	Apologies received
	No longer member